## **SEEC FORM 1**

## STATE ELECTIONS ENFORCEMENT COMMISSION

Registration by Candidate

Revised January 2014



REGISTRATION TYPE 1	ELECTION DAT	ΓΕ (mm/dd/yyyy)	2. OFFI	CE OR POSITION SOUGHT	3. DISTRIC	NUMBER			
<b>⊙</b> Initial <b>○</b> Amendment	Nov 3, 2015		City Co	puncil	(If applicable)				
4. PARTY AFFILIATION	THE LOCAL STREET	relative passes for							
Republican    O Democratic    Other (Specify)									
5. CANDIDATE NAME		· 一个			(1947) (44) (21) (14) (15) (14)				
First Name			1	Last Name		Suffix			
Anthony	Parking of the Helican Colonia and the Colonia			D'Amato					
6. CANDIDATE RESIDENCE ADDRESS (If different)									
Street Address  Address  220 Morningside Dr East									
City		State Zip	Code	City	State	Zip Code			
Bristol		CT 06	5010						
8. CANDIDATE TELEPHONE		9. CANDID	ATE EMA	ALL ADDRESS					
(Include Area Code)  860 209 2842	2								
10. DESIGNATION OF CAMP	AIGN FUNDING	SOURCE							
(Check one)  A. I am forming a candidate committee and I am required to file a Candidate Committee Registration Statement.  Go to Form 1A and complete pages 2 and 3 — Candidate Registration Statement.									
B. I am exempt from forming a candidate committee and I am filing a Certification of Exemption from Forming a Candidate Committee.  Go to Form 1B and complete page 4 — Certification of Exemption from Forming a Candidate Committee.									
30 10 TOTAL 11	ana compiete	puse 4 — C	ci iijicai	ion of Exemption from Forning a C		ee.			
Important Notice: Failure of a candidate to complete this page together with either Form 1A, "Registration of Candidate Committee," or Form 1B "Exemption from Forming a Candidate Committee," within 10 days of becoming a candidate will subject the candidate to a mandatory \$100 late filing fee.  See Section 9-623(b), Connecticut General Statutes.									
Making a false statement on this form may subject you to criminal penalties, including but not limited to, imprisonment for up to one year or a fine of up to two thousand dollars, or both.									

## **SEEC FORM 1A**

## STATE ELECTIONS ENFORCEMENT COMMISSION Candidate Committee Registration Statement



Revised January 2014

REGISTRATION TYPE CANDIDATE N	AME	Topics of S									
⊙Initial ○Amendment Anthony E. D'A	O Amendment Anthony E. D'Amato										
11. COMMITTEE NAME											
D'Amato for Council											
12. COMMITTEE ADDRESS 4 WEBSITE											
Address		Email Address									
99 Gregory Rd		damatoforcouncil@gmail.com									
City	State	Zip Code	Website								
Bristol	CT	06010									
15. TREASURER NAME											
First Name		MI	Last Name Suffix								
Jon		Р	FitzGerald								
16. TREASURER RESIDENCE ADDRESS (If different)											
Street Address  99 Gregory Rd  Address											
	T -										
City	State	Zip Code	City State Zip Code								
Bristol	СТ	06010									
18. TREASURER TELEPHONE 19. TREASURER EMAIL ADDRESS											
(Include Area Code)  860 584 8222 jfitzgerald			rald01@snet.net								
20. DEPUTY TREASURER NAME		ran rakensk se Lette Gold Color									
First Name		MI	Last Name Suffix								
Susan			Henne								
21. DEPUTY TREASURER RESIDENCE ADDR	RESS	化自身信息	22. DEPUTY TREASURER MAILING ADDRESS (If different)								
Street Address			Address								
35 Concetta Lane											
City	State	Zip Code	City State Zip Code								
Bristol	CT	06010									
23. DEPUTY TREASURER TELEPHONE	24. DEP	UTY TREAS	URER EMAIL ADDRESS								
(Include Area Code)  8 ic 584 8i18											
25. DEPOSITORY INSTITUTION NAME											
United Bank											
26. DEPOSITORY INSTITUTION ADDRESS											
Address 4 Riverside Avenue		Bristol State Zip Code 06010									

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REGISTRATION TYPE	CANDIDATE NAM	3					
Initial	at Anthony	EC	Smato				
27. CERTIFICATION					apper 1		
committee registrathis statement incl	ation statement are tru ludes my certification ir have indicated to me	e and ac to the fa	ccurate to the best of a	of the designations set forth in this canding knowledge and belief, and further, the designated herein to serve as my treasurant of them to those positions.  O2/24/2015  DATE (mm/dd/yyyy)	at		
Treasurer							
candidate to serve elector in the State contained in Chap	as the candidate's des of Connecticut. I into	ignated and to co Statutes	treasurer of this cand omply with all the ca s, and to abide by any	ve accepted my appointment by the idate committee. I certify that I am an impaign finance disclosure requirements prohibitions, limitations or restrictions	as		
I certify that I have	e paid any civil penalt	es or for	orfeitures assessed pur	rsuant to chapters 155 to 157, inclusive.			
jurisdiction, any (A under Title 9 of the	A) felony involving fra e General Statues, or the tion of any sentence, v	ud, forg hat at lea	gery, larceny, embezz ast eight years have e	ndere to, in a court of competent element or bribery, or (B) criminal offens elapsed from the date of the conviction out a subsequent conviction of or plea to	se r		
I certify that I am to Commission	not otherwise barred fi	om serv	ving as a treasurer by	order of the State Elections Enforcemen	t		
TREASURE SIGNATURE	1 Paragram			DATE (mm/dd/yyyy)			
Deputy Treasurer							
I hereby certify and state, under penalties of false statement, that I have accepted my appointment by the candidate to serve as the candidate's designated deputy treasurer of this candidate committee, and I understand and accept that, in the event of a vacancy caused by the treasurer's death, incapacity or resignation, I shall automatically become responsible for discharging all of the duties required of the vacating treasurer. I certify that I am an elector in the State of Connecticut. I intend to comply with all the campaign finance disclosure requirements as contained in Chapter 155 of the General Statutes, and to abide by any prohibitions, limitations or restrictions concerning campaign contributions and expenditures.							
I certify that I have	paid any civil penalti	es or for	rfeitures assessed pur	suant to chapters 155 to 157, inclusive.			
jurisdiction, any (A under Title 9 of the plea or the complet	I certify that I have not been convicted of or pled guilty or nolo contendere to, in a court of competent jurisdiction, any (A) felony involving fraud, forgery, larceny, embezzlement or bribery, or (B) criminal offense under Title 9 of the General Statues, or that at least eight years have elapsed from the date of the conviction or plea or the completion of any sentence, whichever date is later, without a subsequent conviction of or plea to another such felony or offense.						
I certify that I am n Enforcement Comr	nission.	om servi	ing as a deputy treasu	arer by order of the State Elections			
DEPUTY TREASURER SIG	NATURE			DATE (mm/dd/vvvv)			

DATE (mm/dd/yyyy)